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Melissa Kruggel	(Depositor's name)
Mh 1h1	(Signature)
October 15, 2004	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR		D INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/509,306	03/23/2000	Ian Reginald Reid		11752-002001	7673	
ȚITLE OF INVENTION: <b>TH</b> I	ERAPEUTIC METHOD					
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1370			\$1400	10/16/2004
EXAMINER		ART UNIT		CLASS-SUBCLASS	]	
LIU, SAMUEL W		1653 514-012000		514-012000	_	
<ul> <li>[ ] Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.</li> <li>[ ] "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.</li> </ul>		agent) and the names of up to 2 registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
PLEASE NOTE: Unless a	e USPTO or is being submitte E	no assignee dat d under separate (B)	a will appear o cover. Comple	n the patent. Inclusion of assig	nee data is only appropriate when stitute for filing an assignment.	n an assignment has been
Please check the appropriate	assignee category or categorie	es (will not be p	inted on the pa	tent): [ ] individual [X]	corporation or other private grou	pentity [ ] governme
4a. The following fee(s) are [X] Issue Fee [ ] Publication Fee [X] Advance Order - # of	enclosed:	,	4b. Payment [X] A che [ ] Paym	of Fee(s): ck in the amount of the fee(s) ent by credit card. Form PTO-	is enclosed.	

Director of Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature)

10-15-04

(Date)

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10/19/2004 FMETEKI2 00000082 09509306

Deposit Account Number 06-1050 (enclose an extra copy of this form).

01 FC:1501 02 FC:8001 1370.00 OP 30.00 OP



Attorney's Docket No.: 11752-002001 / JM503297-003

Notice of Allowance Date: July 16, 2004

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Ian Reginald Reid et al.

Art Unit

1653

Serial No.:

09/509,306

Examiner:

S. Liu

Filed

: March 23, 2000

Confirmation No.:

7673

Title

: THERAPEUTIC METHOD

### MAIL STOP ISSUE FEE

Commissioner for Patents P.O. Box 1450

Alexandria, VA 22313-1450

# RESPONSE TO NOTICE OF ALLOWANCE

In response to the Notice of Allowance mailed July 16, 2004, enclosed are a completed issue fee transmittal form PTOL-85b and a check for \$1400 for the required fee, including patent copies.

Please apply any additional charges or credits to our Deposit Account No. 06-1050, with reference to Attorney Docket Number 11752-002001.

Respectfully submitted,

Fish & Richardson P.C. 225 Franklin Street Boston, MA 02110-2804 Telephone: (617) 542-5070

Facsimile: (617) 542-8906

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# CERTIFICATE OF MAILING BY FIRST CLASS MAIL

I hereby certify under 37 CFR §1.8(a) that this correspondence is being deposited with the United States Postal Service as first class mail with sufficient postage on the date indicated below and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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